Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | t 1: Identify Yourself | | |
|----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for | Christine First name | First name |
| | example, your driver's license or passport). Bring your picture | Middle name | Middle name |
| | identification to your meeting with the trustee. | Lockhart Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0134 | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 2 of 54 Case number (if known)

Debtor 1 Christine Lockhart

| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | | Business name(s) | | | |
| | | EINs | | EINs | | | |
| 5. | Where you live | | | If Debtor 2 lives at a different address: | | | |
| | | 8846 S Burley Ave Chicago, IL 60617 | | | | | |
| | | Number, Street, City, State & ZIP Code | | Number, Street, City, State & ZIP Code | | | |
| | | Cook County | | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | P.O. Box 528127 | | | | | |
| | | Chicago, IL 60652 Number, P.O. Box, Street, City, State & ZIP Code | | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing | Check one: | | Check one: | | | |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | | |

Entered 04/20/16 17:20:32 Desc Main Page 3 of 54 Case 16-13534 Doc 1 Filed 04/20/16

Document Case number (if known) Debtor 1 Christine Lockhart

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 | | | | | | | |
|-----|---|--|----------------------------------|---|---|--|--|--|--|
| | choosing to file under | | | | | | | | |
| | | _ | napter 11 | | | | | | |
| | | | napter 12 | | | | | | |
| | | | napter 13 | | | | | | |
| | | | • | | | | | | |
| 8. | How you will pay the fee | | about how yo | u may pay. Typically, if y attorney is submitting yo | ou are paying the fee yo | k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with | | | |
| | | | | the fee in installments e in Installments (Officia | | on, sign and attach the Application for Individuals to Pay | | | |
| | | | I request that but is not req | t my fee be waived (Youried to, waive your fee, | u may request this option and may do so only if yo | n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that n installments). If you choose this option, you must fill out | | | |
| | | | | | | cial Form 103B) and file it with your petition. | | | |
| €. | Have you filed for bankruptcy within the last 8 years? | ■ No | | | | | | | |
| | iast o years: | ⊔ Ye | s. District | | When | Case number | | | |
| | | | District | | When | Casa sumban | | | |
| | | | District | | When | Case number Case number | | | |
| | | | | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | S. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No | . Go to I | ne 12. | | | | | |
| | | ☐ Ye | s. Has yo | ur landlord obtained an | eviction judgment agains | t you and do you want to stay in your residence? | | | |
| | | | | No. Go to line 12. | | | | | |
| | | | | Yes. Fill out Initial State | ment About an Eviction | Judgment Against You (Form 101A) and file it with this | | | |

Document Page 4 of 54 Case number (if known) Debtor 1 Christine Lockhart Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to

public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Christine Lockhart Document Page 5 of 54 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether

you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 54 Case number (if known) Debtor 1 Christine Lockhart Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Christine Lockhart Signature of Debtor 2 Christine Lockhart Signature of Debtor 1 Executed on April 20, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Christine Lockhart Document Page 7 of 54 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 7 - 7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | G. Stahulak Attorney for Debtor | Date | April 20, 2016 MM / DD / YYYY | | | | |
|---|------------------------------------|---------------|----------------------------------|--|--|--|--|
| Thomas G. | Stahulak | | | | | | |
| Stahulak & Firm name | Associates, L.L.C. / GetFiled | | | | | | |
| 53 W. Jackson Blvd., Suite 652 Chicago, IL 60604 Number, Street, City, State & ZIP Code | | | | | | | |
| Contact phone | (312) 662-1480 | Email address | ecf@stahulakandassociates.com | | | | |
| 6288620 | ate | | | | | | |

| | | Docum | ent Page 8 of 54 | |
|---------------------------------|--------------------------|-------------------|------------------|--------------------------------------|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Christine Lockhart | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | inkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| • | | | |
|-----|--|-------------------|--------------------------|
| Par | Summarize Your Assets | | |
| | | Your a Value o | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 2,063.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 2,063.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 21,835.00 |
| | Your total liabilities | \$ | 21,835.00 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,895.03 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,925.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a personal | family, or |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Case 16-13534 Document

Page 9 of 54
Case number (if known) Debtor 1 Christine Lockhart

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,025.77

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tot | al claim |
|--|-----|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 5,735.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 5,735.00 |

| ■ No. Go to Part 2. □ Yes. Where is the property? Part 2: □ Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No □ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | | | Documei | nt Page 10 of 54 | | |
|--|---|--|---|---|---------------------|-----------------------------------|
| Debtor 2 Season, if Blog) First Nime Midde Name Let Name | Fill in this info | rmation to identify y | our case and this filing: | | | |
| Debtor 2 Season, if Blog) First Nime Midde Name Let Name | Debtor 1 | Christine Lock | nart | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach a separate heet to this form, on the top of any additional pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write your name and case number (if known). In the original pages, write | 20210 | | | Last Name | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 n each category, separately list and describe terms. List an asset only once. If an asset filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Instruction of the property 12/15 Do you own or have any legal or equitable interest in any residence, building, land, or similar property? So you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that comeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. No Yes No Yes No Yes No No No No No No No N | Debtor 2 | | | | | |
| Case number Check if this is an amended filing | (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| Case number Check if this is an amended filing | United States B | Sankruptcy Court for th | e: NORTHERN DISTRICT O | DF ILLINOIS | | |
| Official Form 106A/B Schedule A/B: Property 12/15 n each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you hink it fits best. Be as complete and accurate as possible, it wo married people are filing together, both are equally responsible for supplying correct information. If nor space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Insert every question. Part II: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | Office Otates B | annupley Court for a | | | | |
| Official Form 106A/B Schedule A/B: Property 12/15 neach category, separately list and describe lems. List an asset only once. If an asset filts in more than one category, list the asset in the category where you hink it file best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct reformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), have revery question. Port 15 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? The secribe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Gars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here. \$0.00 Part 35 Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe | Case number | | | | | Check if this is an |
| Schedule A/B: Property 12/15 nech category, separately list and describe liens. List an asset only once. If an asset fits in more than one category, list the asset in the category where you hink it fits best. Be a complete and accurate as possible. It two married people are filing together, both are equally responsible for supplying correct normalion. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Port 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. □ Yes. Where is the property? Port 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No □ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here. ■ Source Sourc | | | | | | amended filing |
| Schedule A/B: Property 12/15 nech category, separately list and describe liens. List an asset only once. If an asset fits in more than one category, list the asset in the category where you hink it fits best. Be a complete and accurate as possible. It two married people are filing together, both are equally responsible for supplying correct normalion. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Port 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. □ Yes. Where is the property? Port 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No □ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here. ■ Source Sourc | | | | | | |
| Schedule A/B: Property 12/15 nech category, separately list and describe liens. List an asset only once. If an asset fits in more than one category, list the asset in the category where you hink it fits best. Be a complete and accurate as possible. It two married people are filing together, both are equally responsible for supplying correct normalion. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Port 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. □ Yes. Where is the property? Port 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No □ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here. ■ Source Sourc | Official E | orm 106A/R | | | | |
| neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you hinkly if its best. Be as complete and accurate as possible. If two married people are filing together, both air equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), answer every question. Port 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | _ | | • | | | |
| hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying Correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part II Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No. No. No. Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | Schedu | ie A/B: Pro | operty | | | 12/15 |
| Yes. Where is the property? | think it fits best. Information. If mo Answer every que | Be as complete and ac ore space is needed, attestion. | curate as possible. If two married ach a separate sheet to this form | I people are filing together, both are equally responsib . On the top of any additional pages, write your name | le for supply | ing correct |
| Yes. Where is the property? | 1. Do you own or | have any legal or equi | table interest in any residence, b | uilding, land, or similar property? | | |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | ■ No. Go to Pa | art 2. | | | | |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on <i>Schedule G: Executory Contracts and Unexpired Leases</i> . 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories <i>Examples</i> : Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | ☐ Yes. Where | e is the property? | | | | |
| Someone else drives. If you lease a vehicle, also report it on <i>Schedule G: Executory Contracts and Unexpired Leases</i> . 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | Part 2: Describe | e Your Vehicles | | | | |
| Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | someone else di | rives. If you lease a ve | chicle, also report it on Schedul | le G: Executory Contracts and Unexpired Leases. | e any venici | es you own mai |
| ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | ■ No | | | | | |
| 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | _ | | | | | |
| Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | □ res | | | | | |
| Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | | | | | | |
| 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | ■ No | | | | | |
| 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | ΠYes | | | | | |
| pages you have attached for Part 2. Write that number here | — 103 | | | | | |
| pages you have attached for Part 2. Write that number here | | | | | | |
| pages you have attached for Part 2. Write that number here | 5 Add the dol | lar value of the porti | on you own for all of your en | tries from Part 2 including any entries for | | |
| Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. Becamples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe | | | | | | \$0.00 |
| Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. Becamples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe | | | | | | _ |
| portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe | Part 3: Describe | e Your Personal and H | ousehold Items | | | |
| Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe | Do you own or | r have any legal or ed | quitable interest in any of the | following items? | port Do n | ion you own? ot deduct secured |
| | Examples: N | | | | olam | io of exemptions. |
| Used personal household furniture and goods/items \$500.00 | Yes. Des | cribe | | | | |
| | | Used p | ersonal household furniture | and goods/items | | \$500.00 |
| | 7. Electronics | | | | | |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

Page 11 of 54
Case number (if known) Document Debtor 1 Christine Lockhart 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$1,500.00 Used personal clothing and accessories 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes..... Cash on hand \$60.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes.....

Case 16-13534

Doc 1

Filed 04/20/16

Entered 04/20/16 17:20:32

Desc Main

| Debt | or 1 | Case 16-1 Christine Lock | | Doc 1 | Filed 04/20/16 Document | Entered 04/20/16 17:20:32 Page 12 of 54 Case number (if known) | Desc Main |
|--------|-----------------|---|------------|-----------------------------|---|---|--|
| | | | 17.1. | Other finan | | ccount held through ADP | \$3.00 |
| | | , mutual funds, o oles: Bond funds, i | | | cks ith brokerage firms, mor | ney market accounts | |
| | | | | Institution or is | ssuer name: | | |
| _j | | ublicly traded sto enture | ck and | nterests in in | corporated and uninc | orporated businesses, including an interes | t in an LLC, partnership, and |
| | | Give specific info | | about them ne of entity: | | % of ownership: | |
| , , | Negoti Non-n | iable instruments i | nclude p | ersonal check | | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| | No Yes. | Give specific infor | | about them er name: | | | |
| | | nent or pension a ples: Interests in IF | | | 1(k), 403(b), thrift saving | s accounts, or other pension or profit-sharing | plans |
| | Yes. | List each account | • | ely. of account: | Institution r | name: | |
| | Your s Examp | | deposit | s you have ma | | tinue service or use from a company ctric, gas, water), telecommunications compar | nies, or others |
| _ | No Yes. | | | | Institution r | name or individual: | |
| _ | | ies (A contract for | a period | lic payment of | money to you, either for | r life or for a number of years) | |
| | No Yes | lss | uer nam | e and descript | ion. | | |
| 26 | | ts in an education C. §§ 530(b)(1), 52 | | | | ogram, or under a qualified state tuition pro | gram. |
| | | Ins | titution n | ame and desc | cription. Separately file th | ne records of any interests.11 U.S.C. § 521(c) | |
| _ | No | | | | rty (other than anythin | g listed in line 1), and rights or powers exe | ercisable for your benefit |
| | | Give specific info | | | | | |
| ı | | | | | ets, and other intellectures are roceeds from royalties a | ual property and licensing agreements | |
| | Yes. | Give specific info | rmation | about them | | | |
| | | es, franchises, and ples: Building perm | | | | n holdings, liquor licenses, professional licens | es |
| | | Give specific info | rmation | about them | | | |
| Mon | ey or | property owed to | you? | | | | Current value of the portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 3

claims or exemptions.

Page 13 of 54
Case number (if known) Document Debtor 1 Christine Lockhart 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No $\hfill \square$ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$63.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Schedule A/B: Property

Official Form 106A/B

Case 16-13534

Doc 1

Filed 04/20/16

Entered 04/20/16 17:20:32

Desc Main

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 14 of 54 Case number (if known)

| | Do you have other property of any kind you did not already Examples: Season tickets, country club membership No Yes. Give specific information | / list? | | _ | |
|------|--|------------|------------|----------------------------|----------------|
| 54. | Add the dollar value of all of your entries from Part 7. Writ | te that nu | umber here | | \$0.00 |
| Part | 8: List the Totals of Each Part of this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$0.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | | \$2,000.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$63.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | | \$2,063.00 | Copy personal property tot | tal \$2,063.00 |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

Debtor 1

\$2,063.00

| | I in this inform | | | | | |
|--------------------------|--|---|--|-----------------------------------|---|--|
| | ebtor 1 | | | | | |
| De | DIOI I | Christine Lockhart First Name | Middle Name | L | ast Name | |
| | ebtor 2 | First Name | Medalla Nassa | | (N | |
| (Sp | ouse if, filing) | First Name | Middle Name | | ast Name | |
| Un | ited States Ban | kruptcy Court for the: NOF | THERN DISTRICT O | F ILLIN | OIS | |
| | nse number | | | | | ☐ Check if this is an amended filing |
| | | | | | | |
| <u>O</u> | fficial For | <u>m 106C</u> | | | | |
| S | chedule | e C: The Prope | rty You Cl | aim | as Exempt | 4/16 |
| the nee cas | property you lis eded, fill out and e number (if kno | sted on <i>Schedule A/B: Propert</i> I attach to this page as many o own). | y (Official Form 106A/I copies of <i>Part 2: Additi</i> | B) as yo ional Pa | our source, list the property that you ge as necessary. On the top of any | additional pages, write your name an |
| spe any fun exe | ecific dollar am applicable sta ds—may be ur emption to a pa | ount as exempt. Alternative atutory limit. Some exemption ilmited in dollar amount. Ho | ly, you may claim the ns—such as those fo wever, if you claim a | e full fai or healt an exen | ir market value of the property be th aids, rights to receive certain l option of 100% of fair market valu | One way of doing so is to state a eing exempted up to the amount of penefits, and tax-exempt retirement ue under a law that limits the tt, your exemption would be limited |
| | | | | | | |
| Pa | rt 1: Identify | y the Property You Claim as | Exempt | | | |
| | | y the Property You Claim as exemptions are you claiming | • | ven if yo | our spouse is filing with you. | |
| | Which set of | exemptions are you claimin | g? Check one only, ev | • | , , | |
| | Which set of o | exemptions are you claiming state and federal nonba | g? Check one only, ev | • | , , | |
| 1. | Which set of of the You are classification ☐ | exemptions are you claiming state and federal nonba | g? Check one only, even the one of the one only, even the one of the | 11 U.S | S.C. § 522(b)(3) | |
| 1. | Which set of of You are cla ☐ You are cla For any proper | exemptions are you claiming state and federal nonbactiming federal exemptions. 11 erty you list on Schedule A/A | g? Check one only, eventually exemptions. U.S.C. § 522(b)(2) B that you claim as e | 11 U.S | 6.C. § 522(b)(3) fill in the information below. | Considire laws that allow assessming |
| 1. | Which set of of You are cla ☐ You are cla For any proper Brief description | exemptions are you claiming state and federal nonba | g? Check one only, even the one of the one only, even the one of the | 11 U.S | S.C. § 522(b)(3) | Specific laws that allow exemption |
| 1. | Which set of of You are cla ☐ You are cla For any proper Brief description | exemptions are you claiming state and federal nonbactiming federal exemptions. 11 erty you list on Schedule A/lon of the property and line on | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from | 11 U.S xempt, | 6.C. § 522(b)(3) fill in the information below. | Specific laws that allow exemption |
| 1. | Which set of of You are cla ☐ You are cla For any proper Brief description Schedule A/B to Used person | exemptions are you claiming state and federal nonbactiming federal exemptions. 11 erty you list on Schedule A/lon of the property and line on | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from Schedule A/B | 11 U.S xempt, Amo | fill in the information below. | Specific laws that allow exemption 735 ILCS 5/12-1001(b) |
| 1. | Which set of of You are cla ☐ You are cla For any proper Brief description Schedule A/B to | exemptions are you claiming state and federal nonbactiming federal exemptions. 11 erty you list on Schedule A/lon of the property and line on hat lists this property | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from | 11 U.S xempt, Amo | fill in the information below. count of the exemption you claim cock only one box for each exemption. | |
| 1. | Which set of of ■ You are cla □ You are cla For any prope Brief description Schedule A/B the Used person goods/items Line from Sche Used person | exemptions are you claiming state and federal nonbastiming federal exemptions. 11 erty you list on Schedule A/lon of the property and line on hat lists this property all household furniture and edule A/B: 6.1 | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from Schedule A/B \$500.00 | 11 U.S xempt, Ame Che | fill in the information below. count of the exemption you claim ck only one box for each exemption. \$500.00 100% of fair market value, up to | |
| 1. | Which set of of ■ You are cla □ You are cla For any prope Brief description Schedule A/B the Used person goods/items Line from Sche Used person | exemptions are you claiming state and federal nonbactiming federal exemptions. 11 erty you list on Schedule A/lon of the property and line on hat lists this property | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from Schedule A/B \$500.00 | 11 U.S xempt, Ame Che | fill in the information below. bount of the exemption you claim eck only one box for each exemption. \$500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| 1. | Which set of a You are cla You are cla For any prope Brief description Schedule A/B th Used personn goods/items Line from Sche Used person Line from Sche Cash on han | exemptions are you claiming state and federal nonbastiming federal exemptions. 11 erty you list on Schedule A/B on of the property and line on that lists this property aral household furniture and edule A/B: 6.1 and clothing and accessorie edule A/B: 11.1 | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from Schedule A/B \$500.00 | xempt, Ama | fill in the information below. count of the exemption you claim ck only one box for each exemption. \$500.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to | 735 ILCS 5/12-1001(b) |
| 1. | Which set of a You are cla You are cla For any prope Brief description Schedule A/B th Used personn goods/items Line from Sche Used person Line from Sche Cash on han | exemptions are you claiming state and federal nonbastiming federal exemptions. 11 erty you list on Schedule A/lon of the property and line on hat lists this property and lousehold furniture and edule A/B: 6.1 all clothing and accessorie edule A/B: 11.1 | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from Schedule A/B \$500.00 | xempt, Ama | fill in the information below. Sound of the exemption you claim seck only one box for each exemption. \$500.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(a) |
| 1. | Which set of the You are classed Programy Property Schedule A/B to Schedule A/ | exemptions are you claiming state and federal nonbastiming federal exemptions. 11 erty you list on Schedule A/B on of the property and line on that lists this property aral household furniture and edule A/B: 6.1 and clothing and accessorie edule A/B: 11.1 | g? Check one only, evenkruptcy exemptions. U.S.C. § 522(b)(2) B that you claim as e Current value of the portion you own Copy the value from Schedule A/B \$500.00 | xempt, Ama | fill in the information below. Sound of the exemption you claim seck only one box for each exemption. \$500.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 100% of fair market value, up to any applicable statutory limit \$60.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(a) |

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

□ No

Official Form 106C

☐ Yes

Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Case 16-13534 Page 16 of 54 Case number (if known) Document

Debtor 1 Christine Lockhart

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 17 of 54

| Fill in this information to identify your case: | | | | | |
|---|--------------------------|-------------------|-------------|--|--------------------------------------|
| Debtor 1 | Christine Lockhart | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | | Document | Page 18 of 54 | |
|--|---|--|---|--|
| Fill in th | nis information to identify your o | case: | | |
| Debtor 1 | Christine Lockhart | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, | | Middle Name | Last Name | |
| United S | States Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | |
| Case nu (if known) | umber | | - | Check if this is an amended filing |
| Sche | al Form 106E/F dule E/F: Creditors W | | | 12/15 |
| any exect Schedule Schedule left. Attac name and | utory contracts or unexpired leases G: Executory Contracts and Unexpi D: Creditors Who Have Claims Secuth the Continuation Page to this paged case number (if known). | that could result in a claim. Also ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | TY claims and Part 2 for creditors with NONPRIORITY cla list executory contracts on Schedule A/B: Property (Offic Do not include any creditors with partially secured claims needed, copy the Part you need, fill it out, number the ereport in a Part, do not file that Part. On the top of any add | cial Form 106A/B) and on s that are listed in ntries in the boxes on the |
| Part 1: | List All of Your PRIORITY Un | | | |
| _ | ny creditors have priority unsecured | d claims against you? | | |
| ■ N | lo. Go to Part 2. | | | |
| ΠY | es. | | | |
| Part 2: | | | | |
| 3. Do a | ny creditors have nonpriority unsec | ured claims against you? | | |
| | lo. You have nothing to report in this pa | art. Submit this form to the court with | your other schedules. | |
| ■ Y | es. | | | |
| unse | cured claim, list the creditor separately one creditor holds a particular claim, li | for each claim. For each claim liste | he creditor who holds each claim. If a creditor has more the d, identify what type of claim it is. Do not list claims already in have more than three nonpriority unsecured claims fill out the | cluded in Part 1. If more |
| | | | | Total claim |
| 4.1 | Bank of America | Last 4 digits of acc | count number | \$200.00 |
| | Nonpriority Creditor's Name PO BOX 15710 Wilmington, DE 19886 | When was the deb | ot incurred? | _ |
| _ | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you | file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and and | • | RITY unsecured claim: | |
| | ☐ Check if this claim is for a comm | Па | | |
| | debt Is the claim subject to offset? | | ing out of a separation agreement or divorce that you did not aims | |
| | ■ No | ☐ Debts to pension | n or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | NSF Fees | |
| | | | | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 19 of 54

| Debi | Or 1 Christine Locknart | Case number (if know) | |
|------|---|---|------------|
| 4.2 | Capital One | Last 4 digits of account number | \$500.00 |
| | Nonpriority Creditor's Name P.O. Box 70886 | When was the debt incurred? | |
| | Charlotte, NC 28272 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | |
| 4.3 | Chase | Last 4 digits of account number | \$200.00 |
| 4.0 | Nonpriority Creditor's Name | When was the debt incurred? | φ200.00 |
| | PO BOX 15153 Wilmington, DE 19886 | when was the dept incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify NSF Fees | |
| 1.1 | City of Chicago | Last 4 digits of account number | \$2.500.00 |
| 4.4 | City of Chicago Nonpriority Creditor's Name | Last 4 digits of account number | \$3,500.00 |
| | Department of Revenue PO BOX 88292 | When was the debt incurred? | |
| | Chicago, IL 60680 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | | |
| | L res | ■ Other. Specify Parking Tickets | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 20 of 54

| Debioi | Christine Lockhart | | Case number (if know) | |
|--------|--|--|---|----------|
| 4.5 | CMRE Financial Services | Last 4 digits of account number | 7900 | \$55.00 |
| | Nonpriority Creditor's Name 3075 E Imperial Hwy | When was the debt incurred? | Opened 10/01/15 | |
| | Suite 200 Brea, CA 92821 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | o plans, and other similar debts | |
| | □Yes | | attorney Radiology Imaging | |
| | _ 100 | Consultants | · | |
| 4.6 | Commonwealth Edison Nonpriority Creditor's Name | Last 4 digits of account number | | \$800.00 |
| | Bankruptcy Dept 3 Lincoln Center | When was the debt incurred? | | |
| | Oakbrook Terrace, IL 60181 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | □Yes | Other. Specify Agriculture | | |
| 4.7 | Credit Management, LP | Last 4 digits of account number | 3465 | \$345.00 |
| | Nonpriority Creditor's Name | - | | • |
| | Attn: Bankruptcy Po Box 118288 | When was the debt incurred? | Opened 1/01/10 | |
| | Carrolton, TX 75011 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | og plans, and other similar debts | |
| | — NO | | attorney Wow Internet Cable | |
| | Yes | Other. Specify Phone - 1 | Money wow internet Cable | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 21 of 54

| Debt | or 1 Christine Lockhart | | Case number (if know) | |
|----------|---|-------------------------------------|---|------------|
| 4.8 | Credit One Nonpriority Creditor's Name | Last 4 digits of account number | | \$500.00 |
| | POBox 60500 City of Industry, CA 91716 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ,, | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | |
| 4.9 | Dept Of Ed/Navient | Last 4 digits of account number | 0905 | \$3,798.00 |
| | Nonpriority Creditor's Name | _ | On an and 0/04/40 Least Astina | |
| | Attn: Claims Dept Po Box 9400 | When was the debt incurred? | Opened 9/01/12 Last Active 3/31/16 | |
| | Wilkes Barr, PA 18773 | when was the dept incurred: | 3/31/10 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | I - Notice Only | |
| 4.1 0 | Dept Of Ed/Navient | Last 4 digits of account number | 0905 | \$1,937.00 |
| | Nonpriority Creditor's Name | _ | | |
| | Attn: Claims Dept | When we the debt incomed? | Opened 9/01/12 Last Active | |
| | Po Box 9400 Wilkes Barr, PA 18773 | When was the debt incurred? | 3/31/16 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | I - Notice Only | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 22 of 54

| Jebio | Christine Lockhart | | Case number (if know) | |
|----------|--|---|--|-----------------|
| 4.1 1 | Diversified Consultant | Last 4 digits of account number | 6819 | \$958.00 |
| | Nonpriority Creditor's Name Dci | When was the debt incurred? | Opened 12/01/15 | |
| | Po Box 551268 | when was the debt incurred? | Opened 12/01/15 | - |
| | Jacksonville, FL 32255 | _ | | |
| | Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | I alaim. | |
| | At least one of the debtors and another | Student loans | i ciaim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ration agreement of divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Collection A | ttorney Comcast | - |
| 4.1 | Overage to Baral | | | # 000.00 |
| 2 | Guaranty Bank Nonpriority Creditor's Name | Last 4 digits of account number | | \$200.00 |
| | PO BOX 240200 | When was the debt incurred? | | |
| | Milwaukee, WI 53224 | | | - |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | Пол | | |
| | | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| | At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ration agreement of alveree that you are not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify NSF Fees | | |
| 4.1 | IL Dept of Employment Security | | | \$3,500.00 |
| 3 | Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ5,300.00 |
| | 33 S State St 8th Flr | When was the debt incurred? | | _ |
| | Benefit Payment Control | | | |
| | Chicago, IL 60603 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | 7.6 or the date you me, the claim? | o. Oncor all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharin | | |
| | Yes | Other, Specify Overpaymen | nt of Benefits | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 23 of 54 Case number (if know)

| DCDIC | Chilistine Lockhait | | Case Harriber (ii know) | |
|----------|---|---|---|------------|
| 4.1 4 | Illinois Tollway | Last 4 digits of account number | | \$500.00 |
| | Nonpriority Creditor's Name Attn: Legal Dept 2700 Ogden Ave | When was the debt incurred? | | |
| | Downers Grove, IL 60515 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | Contingent | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing | aration agreement or divorce that you did not | |
| | ☐ Yes | Other. Specify Tollway Fee | es | |
| 4.1 5 | Peoples Gas Nonpriority Creditor's Name | Last 4 digits of account number | 0549 | \$3,542.00 |
| | Nonpriority Creditors Name 200 E Randolph St 20th Floor Chicago, IL 60601 Number Street City State Zlp Code Who incurred the debt? Check one. | When was the debt incurred? As of the date you file, the claim | Opened 9/28/13 Last Active 7/09/14 is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharin ☐ Other. Specify Agriculture | g plans, and other similar debts | |
| 4.1 6 | Sprint Nonpriority Creditor's Name | Last 4 digits of account number | | \$300.00 |
| | 1 Sprint Parkway Overland Park, KS 66251 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | Type of NONPRIORITY unsecure | d claim: | |
| | ■ No | ☐ Debts to pension or profit-sharin | | |
| | LL TES | Other Specify OFIVICE City | 1146 | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 24 of 54
Christine Lockhart Case number (if know)

| DCDIO | CHIISTINE LOCKHAIT | Odde Hamber (II know) | |
|-------|---|--|----------|
| 4.1 | T-Mobile/T-Mobile USA INC | Last 4 digits of account number | \$300.00 |
| | Nonpriority Creditor's Name %American Infosource LP PO Box 248848 | When was the debt incurred? | |
| | Oklahoma City, OK 73124 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Service Charge | |
| 4.1 | TCF | Last 4 digits of account number | \$200.00 |
| 8 | Nonpriority Creditor's Name | | Ψ200.00 |
| | 500 Joliet Road | When was the debt incurred? | |
| | Willowbrook, IL 60527 Number Street City State Zlp Code | As of the date you file the claim in Check all that each | |
| | Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | | |
| | _ | ☐ Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | | |
| | Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify NSF Fees | |
| 4.1 | Verizon | Last 4 digits of account number | \$300.00 |
| 9 | Nonpriority Creditor's Name 500 Technology Dr Ste 30 | When was the debt incurred? | ***** |
| | Saint Charles, MO 63304 | - Accepted to the confidence of the state of | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | По с | |
| | | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other Specify Service Charge | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 25 of 54 Case number (if know) Debtor 1 Christine Lockhart 4.2 Washington Mutual \$200.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? Chase P.O. Box 15153 Wilmington, DE 19886 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify NSF Fees Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Bank of America Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 940812 Part 2: Creditors with Nonpriority Unsecured Claims Simi Valley, CA 93094-0812 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Cap One □ Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 85520 □ ■ Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23285 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 105474 Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30348 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO BOX 30281 Part 2: Creditors with Nonpriority Unsecured Claims Salt Lake City, UT 84130 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Capital One Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO BOX 85520 Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23285 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Chase Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 24696 Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43224-0696 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

P.O. Box 98873 City of Industry, CA 91716-0500

Credit One

Last 4 digits of account number

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor?

Page 26 of 54 Document Debtor 1 Christine Lockhart Case number (if know) Credit One Bank Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO BOX 98875 Part 2: Creditors with Nonpriority Unsecured Claims Las Vegas, NV 89193 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Guaranty Bank** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO BOX 245014 Part 2: Creditors with Nonpriority Unsecured Claims Milwaukee, WI 53224 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Illinois Department of Employment Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Benefit Collections** Part 2: Creditors with Nonpriority Unsecured Claims PO BOX 6996 Chicago, IL 60606-6996 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Sprint Corp Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept Part 2: Creditors with Nonpriority Unsecured Claims PO Box 7949 Overland Park, KS 66207 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? T-Mobile Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims T-Mobile Bankruptcy Team Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 53410 Bellevue, WA 98015 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? TCF Bank Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 18160 Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul, MN 55118 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Verizon Wireless Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 26055 ■ Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis, MN 55426 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Verizon Wireless Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1 Verizon Place Part 2: Creditors with Nonpriority Unsecured Claims Alpharetta, GA 30004 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Verizon Wireless Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 777 Big Timber Road Part 2: Creditors with Nonpriority Unsecured Claims Elgin, IL 60123 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Washington Mutual Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 900123 ■ Part 2: Creditors with Nonpriority Unsecured Claims Louisville, KY 40290 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 0.00 Total

claims
Official Form 106 E/F

Case 16-13534

Doc 1

Filed 04/20/16

Entered 04/20/16 17:20:32

Desc Main

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 27 of 54

| Debtor 1 C | hristine l | _ockhart | Case n | number (i | f know) |
|----------------------|------------|---|--------|-----------|-------------|
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 5,735.00 |
| claims rom Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 16,100.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 21,835.00 |

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Christine Lockhart | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or le Name, Number, Street, City, State and ZIP Code | ase State what the contract or lease is for |
|---|---|
| 2.1 East Lake Management2850 South Michigan Avenue STE 100Chicago, IL 60616 | Yearly Apartment Lease |

| | | Docume | ent Page 29 d |)T 54 | |
|--------------------------------|---|---|---------------------------|----------------------------|--|
| Fill in this | information to identify your | | | | |
| Debtor 1 | Christine Lockhar | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | - | | | |
| Case numb | oer | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | l Form 106H | | | | |
| | lule H: Your Cod | ebtors | | | 12/15 |
| <u> </u> | dio III. I odi oca | | | | 1213 |
| fill it out, ar your name | | boxes on the left. Attach). Answer every question | n the Additional Page t | o this page. On the top of | ded, copy the Additional Page, any Additional Pages, write |
| 1. 50 | you have any codebiors: (II | you are ming a joint case, | do not list eliner spouse | as a codebior. | |
| ■ No □ Yes | | | | | |
| | nin the last 8 years, have you a, California, Idaho, Louisiana | | | | ates and territories include |
| ■ No. | Go to line 3. | | | | |
| | . Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| in line Form | 2 again as a codebtor only | if that person is a guaran | tor or cosigner. Make | sure you have listed the c | ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The credit | or to whom you owe the debt nat apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | _ | |
| (| City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| 7 | Number Street | | | _ | |
| (| City | State | ZIP Code | | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 30 of 54

| Fill | in this information to identify your ca | ase: | | | | | ļ | | | | |
|--------------------|---|----------------------------|-------------------|-------------------------|-----------|------------|-------------|----------------|--|---------------|----------|
| Del | otor 1 Christine Loc | khart | | | | _ | | | | | |
| | otor 2 | | | | | _ | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLI | NOIS | | | | | | | |
| (If kr | se number nown) | | - | | | | ☐ Ar | | d filing ent showing p as of the follo | | |
| <u>O</u> | fficial Form 106I | | | | | | M | M / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | | 12/1 |
| spo atta Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment | r spouse is not filing wi | ith you, do | not includ | le infor | mati | on about | your spo | use. If more | e space is ı | needed, |
| 1. | Fill in your employment information. | | Debtor | 1 | | | | Debtor 2 | or non-filin | ng spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | Employment status | | | ☐ Employed | | | | | |
| | | Employment status | ☐ Not employed | | | | | ☐ Not employed | | | |
| | employers. | Occupation | Cashie | Cashier | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Aramar | k Campus | , LLC. | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | _ | larket St elphia, PA | 19107 | | | | | | |
| | | How long employed to | here? | 1 Year | | | | _ | | | |
| Par | Give Details About Mor | nthly Income | | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have n | nothing to re | port for | any | line, write | \$0 in the | space. Inclu | de your nor | n-filing |
| | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the | information | for all e | empl | oyers for t | hat perso | n on the line | s below. If y | you need |
| | | | | | | | For Deb | tor 1 | For Debto | | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | | 2. | \$ | 1, | 328.77 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | | 3. | +\$ | | 0.00 | +\$ | N/A | |

1,328.77

N/A

Calculate gross Income. Add line 2 + line 3.

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 31 of 54

| Debt | or 1 | Christine Lockhart | _ | С | ase number (if | known) | | | | |
|------|--------------------|--|------------|----|----------------|--------|----------|-------------------------|--------------|----------|
| | | | | | For Debtor 1 | | non- | Debtor 2 -filing spo | ouse | |
| | Cop | by line 4 here | 4. | | \$1,32 | 28.77 | \$ | | N/A | |
| 5. | List | t all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ 13 | 30.74 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | \$ | 0.00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$ | 0.00 | \$ | | N/A | |
| | 5e. | Insurance | 5e. | | \$ | 0.00 | \$ | | N/A | |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | \$ | | N/A | |
| | 5g. | Union dues | 5g. | | \$ | 0.00 | \$ | | N/A | |
| | 5h. | Other deductions. Specify: | 5h. | .+ | \$ | 0.00 | + \$ | | N/A | |
| 6. | | d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | (| | 80.74 | \$ | | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | (| 1,19 | 8.03 | \$ | | N/A | |
| 8. | List 8a. | profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 0- | | r. | 0.00 | c | | N 1/A | |
| | O.L. | monthly net income. Interest and dividends | 8a. 8b. | | \$ | 0.00 | \$ | | N/A | |
| | 8b. 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | \$ | 0.00 | Φ | | N/A | |
| | | settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ | | N/A | |
| | 8d. | . , . | 8d. | | \$ | 0.00 | \$ | | N/A | |
| | 8e. | Social Security | 8e. | | \$ | 0.00 | \$ | | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps | e 8f. | | \$ 69 | 7.00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | | \$ | 0.00 | \$ | | N/A | • |
| | 8h. | Other monthly income. Specify: | 8h. | .+ | \$ | 0.00 | + \$ | | N/A | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 69 | 7.00 | \$ | | N/A | |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 1,895.03 | + \$ | | N/A = | \$ | 1,895.03 |
| | | If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | _ | 1,000.00 | | | -1471 | - | 1,000.00 |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify: | depe | | | | • | chedule J | | 0.00 |
| 12. | Wri | d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | \$ | 1,895.03 |
| 13. | Do | you expect an increase or decrease within the year after you file this form No. | ? | | | | | _ | | y income |
| | П | Yes, Explain: | | | • | | | · | | |

Schedule I: Your Income

page 2

Official Form 106I

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 32 of 54

| Fill in | this information to identify your case: | | | | |
|------------------|--|--|----------------------|---|--|
| Debtor | 1 Christine Lockhart | | Che | ck if this is: | |
| D 1. | | | | An amended filing | |
| Debtor (Spous | se, if filing) | | | A supplement show 13 expenses as of | ving postpetition chapter the following date: |
| United | States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| | number | | | | |
| (If know | | | | | |
| Offi | icial Form 106J | | | | |
| Sch | nedule J: Your Expenses | | | | 12/15 |
| Be as inform | complete and accurate as possible. If two married people ar nation. If more space is needed, attach another sheet to this per (if known). Answer every question. | e filing together, both form. On the top of an | are equ ny additi | ially responsible fo onal pages, write y | r supplying correct our name and case |
| | s this a joint case? | | | | |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> | for Separate Househo | <i>ld</i> of Deb | otor 2. | |
| 2. | Oo you have dependents? ☐ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relations Debtor 1 or Debtor 2 | ship to | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| d | dependents names. | Son | | _ 3 | ■ Yes □ No |
| | | Son | | 3 | ■ Yes |
| | | | | | □ No |
| | | Daughter | | 6 | ■ Yes |
| | | Son | | 7 | □ No |
| | | | | | ■ Yes □ No |
| | | Daughter | | 9 | ■ Yes |
| е | Do your expenses include expenses of people other than yourself and your dependents? | | | | |
| Estim exper | Estimate Your Ongoing Monthly Expenses late your expenses as of your bankruptcy filing date unless yeses as of a date after the bankruptcy is filed. If this is a supposable date. | ou are using this forn lemental <i>Schedule J</i> , | n as a su check t | upplement in a Cha he box at the top of | pter 13 case to report f the form and fill in the |
| the va | de expenses paid for with non-cash government assistance in alue of such assistance and have included it on <i>Schedule I: Y</i> ial Form 106I.) | | | Your expe | enses |
| | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | nclude first mortgage | 4. \$ | \$ | 100.00 |
| If | f not included in line 4: | | | | |
| 4 | ta. Real estate taxes | | 4a. S | \$ | 0.00 |
| | tb. Property, homeowner's, or renter's insurance | | 4b. S | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues | | 4c. 9 | · | 0.00 |
| 4 | ғน เางเทองพทอเ จ สจจงเปลแบท บา เบเทนบทิทิทิทิทิท นินฮิจิ | | 4u. 3 | Ψ | 0.00 |

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 33 of 54

Debtor 1 Christine Lockhart Case number (if known)

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 34 of 54

| Debt | or 1 Christine Lockhart | Case num | ber (if known) | |
|------------|---|-----------|---------------------|--------------------------|
| 6. | Utilities: | | | |
| J. | 6a. Electricity, heat, natural gas | 6a. | \$ | 350.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 170.00 |
| | 6d. Other. Specify: | 6d. | · | |
| , | · · · | | | 0.00 |
| | Food and housekeeping supplies | 7. | · | 800.00 |
| 3. | Childcare and children's education costs | 8. | \$ | 0.00 |
| | Clothing, laundry, and dry cleaning | 9. | \$ | 130.00 |
| 0. | Personal care products and services | 10. | \$ | 95.00 |
| 1. | Medical and dental expenses | 11. | \$ | 100.00 |
| 2. | Transportation. Include gas, maintenance, bus or train fare. | 4.0 | • | 120.00 |
| | Do not include car payments. | 12. | · | 120.00 |
| | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 4. | Charitable contributions and religious donations | 14. | \$ | 0.00 |
| 5. | Insurance. | | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 0.00 |
| | 15b. Health insurance | 15b. | \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 0.00 |
| | 15d. Other insurance. Specify: | 15d. | | 0.00 |
| 6. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | _ | • | 0.00 |
| | Specify: | 16. | \$ | 0.00 |
| | Installment or lease payments: | | • | 0.00 |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | · - | 0.00 |
| | 17c. Other. Specify: | 17c. | · | 0.00 |
| | | — 17d. | · | |
| | 17d. Other. Specify: | 170. | Ψ | 0.00 |
| ο. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| q | Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| ٥. | Specify: | 19. | * | 0.00 |
| Λ | Other real property expenses not included in lines 4 or 5 of this form or on <i>Sched</i> | | our Income | |
| Ο. | 20a. Mortgages on other property | 20a. | | 0.00 |
| | 20b. Real estate taxes | 20b. | | 0.00 |
| | | | · - | |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| 1. | Other: Specify: Books/Supplies for dependents | 21. | +\$ | 60.00 |
| 10 | Coloulate very mentilly evenence | | | |
| ۷. | Calculate your monthly expenses | | • | 4.005.00 |
| | 22a. Add lines 4 through 21. | | \$ | 1,925.00 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 1,925.00 |
| 2 | Calculate your monthly not income | | | |
| .ა. | Calculate your monthly net income. | 00- | ¢. | 4 005 00 |
| | 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 1,895.03 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 1,925.00 |
| | | | | |
| | 23c. Subtract your monthly expenses from your monthly income. | 23c. | \$ | -29.97 |
| | The result is your monthly net income. | 23C. | Ψ | -23.31 |
| 2.4 | Do you gymaet an ingress or degrees in your annual within the your firm | file thi- | . farm? | |
| ∠4. | Do you expect an increase or decrease in your expenses within the year after you For example, do you expect to finish paying for your car loan within the year or do you expect your n | | | or decrease because of a |
| | modification to the terms of your mortgage? | iorigage | payment to increase | or decrease necause of a |
| | ■ No. | | | |
| | | | | |
| | Yes. Explain here: | | | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 35 of 54

| Fill in this infor | mation to identify your | case: | | | |
|-------------------------------------|--|--------------------------|------------------------------|----------------------------|--|
| Debtor 1 | Christine Lockhart | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | m 106Dec | | | | |
| Declarat | tion About a | ın Individual | Debtor's Scl | hedules | 12/15 |
| obtaining mone years, or both. 1 | | n connection with a ban | | | nt, concealing property, or r imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an atto | rney to help you fill out ba | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | tcy Petition Preparer's Notice, d Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | nmary and schedules filed | l with this declaration ar | nd |
| X /s/ Chr | istine Lockhart | | X | | |
| | ne Lockhart ire of Debtor 1 | | Signature of D | Debtor 2 | |

Date _____

Date April 20, 2016

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 36 of 54

| F | l in this inform | nation to identify you | r case: | | | | | | | | |
|----------|----------------------------|--|---|---|--|---|--|--|--|--|--|
| De | btor 1 | Christine Lockhai | Middle Name | Last Name | | | | | | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | | | | | | |
| Un | ited States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | | | | | | |
| Ca | se number | | | | | | | | | | |
| (if k | nown) | | | | _ | Check if this is an imended filing | | | | | |
| <u> </u> | · · · · · · - · | 407 | | | | | | | | | |
| | fficial For | | Affairs for Individ | duals Filing for R | ankruntev | 4/16 | | | | | |
| | | | | | equally responsible for sup | | | | | | |
| info | rmation. If m | | attach a separate sheet to | | additional pages, write you | | | | | | |
| | | , | arital Status and Where You | Lived Before | | | | | | | |
| 1. | | current marital statu | | 2.1104 201010 | | | | | | | |
| | ☐ Married | | | | | | | | | | |
| | ■ Not mar | ried | | | | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | | | | | | |
| | ■ No | No | | | | | | | | | |
| | ☐ Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | '. | | | | | | |
| | Debtor 1 Pri | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | | |
| 3. | | | | | ity property state or territor | | | | | | |
| stat | es and territori | es include Arizona, Ca | lifornia, Idaho, Louisiana, Ne | vada, New Mexico, Puerto Ri | co, Texas, Washington and V | Visconsin.) | | | | | |
| | ■ No | | | w = | | | | | | | |
| | ☐ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | | | |
| Pa | rt 2 Explai | n the Sources of You | r Income | | | | | | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part- | | ndar years? | | | | | |
| | □ No | | | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$4,899.12 | ☐ Wages, commissions, bonuses, tips | | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | | |

Official Form 107

Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Case 16-13534 Document

Page 37 of 54 Case number (if known) Debtor 1 Christine Lockhart

| | | | | Debtor ' | 1 | | | D | ebtor 2 | | |
|-----|--|--|--|---------------------------------------|--|-------------------------------|---|--------------------------------------|---|------------------------------|---|
| | | | | | s of income Il that apply. | (be | oss income fore deductions and lusions) | | ources of inc heck all that a | | Gross income (before deductions and exclusions) |
| | last calen nuary 1 to | dar year: December | 31, 2015) | ■ Wage | es, commissions, s, tips | | \$16,023.0 | | l Wages, com onuses, tips | nmissions, | |
| | | | | ☐ Opera | ating a business | | | | Operating a | business | |
| 5. | Include include and other winnings. | come regard public bene If you are fil | lless of wheth fit payments; ing a joint cas | er that inc pensions; e and you | come is taxable. Ex rental income; inte have income that | amples rest; di you red | | re alimo llected f t it only o | rom lawsuits; once under D | royalties; and ebtor 1. | ecurity, unemployment, d gambling and lottery |
| | Yes. | Fill in the de | etails. | | | | | | | | |
| | | | | Debtor 1 Sources Describe | of income | eac (be | oss income from th source fore deductions and lusions) | Se De | ebtor 2 ources of inc escribe below | | Gross income (before deductions and exclusions) |
| | | | nt year until | Food St | amps | | \$2,788.0 | 00 | | | |
| tne | date you | filed for bar | ткгиртсу: | | | | | | | | |
| Par | t 3: List | : Certain Pa | vments You | Made Bet | fore You Filed for | Bankr | uptcv | | | | |
| _ | · | | | | | | | | | | |
| 6. | □ No. | Neither Deindividual | ebtor 1 nor D primarily for a | ebtor 2 hapersonal, | family, or househo | umer d old purp | lebts. Consumer de | | | | 1(8) as "incurred by an |
| | | □ No. | Go to line 7 | | | | | | | | |
| | | ☐ Yes | paid that cre not include | editor. Do payments | not include payme to an attorney for t | nts for his bar | domestic support of | bligation | ns, such as ch | nild support a | ne total amount you nd alimony. Also, do |
| | ■ Yes. | | | | ve primarily consi d for bankruptcy, d | | l ebts. pay any creditor a t | total of \$ | 600 or more | ? | |
| | | ■ No. | Go to line 7 | | | | | | | | |
| | | □ Yes | List below e include pay | ach credit | | | al of \$600 or more one, such as child s | | | | creditor. Do not nclude payments to an |
| | Creditor' | s Name an | d Address | | Dates of payme | ent | Total amount paid | | mount you still owe | Was this p | payment for |
| 7. | Insiders in of which y a business alimony. | clude your ou ou are an of | elatives; any ficer, director | general pa , person in | artners; relatives of control, or owner | any ge of 20% | | rtnership iting sec | os of which yourities; and a | ou are a gene ny managing | ral partner; corporations agent, including one fo |
| | ■ No □ Yes. | List all par | nonte to an in | oidor | | | | | | | |
| | | Name and | nents to an in: | Siuti. | Dates of payme | ent | Total amount | | mount you | Reason fo | r this payment |
| | moruer 5 | . wille alla | | | Dates of payme | | paid | | still owe | 1100301110 | . and payment |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Page 38 of 54 Case number (if known) Document Debtor 1 Christine Lockhart insider? Include payments on debts guaranteed or cosigned by an insider. П Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the Describe the Property Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

— 100

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Describe what you contributed

Dates you contributed

Value

Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Case 16-13534

Page 39 of 54
Case number (if known) Document Debtor 1 Christine Lockhart

| Pa | rt 6: List Certain Losses | | | | | | | | | |
|-----|---|-----------------|--|-----------------|--------------------------------------|--------------------------|--|--|--|--|
| 15. | Within 1 year before you filed for bankrup or gambling? | otcy or | since you filed for bankruptcy, did y | ou lose anyt | thing because of thef | t, fire, other disaster, | | | | |
| | ■ No | | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | |
| | Describe the property you lost and | Descri | be any insurance coverage for the lo | oss | Date of your | Value of property | | | | |
| | | | the amount that insurance has paid. Lace claims on line 33 of Schedule A/B: | | loss | lost | | | | |
| Pai | rt 7: List Certain Payments or Transfers | | | | | | | | | |
| 16. | Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr | reparir | ng a bankruptcy petition? | | | rty to anyone you | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | ou | Description and value of any propertransferred | erty | Date payment or transfer was made | Amount of payment | | | | |
| | STAHULAK & ASSOCIATES, L.L.C 53 W. Jackson Blvd., Suite 652 Chicago, IL 60604 | | \$1,050.00 (\$55.00 Credit Report \$975.00 Atty Fee + \$20.00 for Or of Taxes) | | 04/20/2016 | \$1,050.00 | | | | |
| | Start Fresh Today 5765 West Sunrise Blvd Fort Lauderdale, FL 33313 | | \$25.00 Credit Counseling | | 04/19/2016 | \$25.00 | | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any proper transferred | erty | Date payment or transfer was made | Amount of payment | | | | |
| 18. | Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alrest No Yes. Fill in the details. | busin made a | ess or financial affairs? as security (such as the granting of a se | | | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | any property or received or debts | Date transfer was made | | | | |
| | Person's relationship to you | | | paid iii ex | viidiige | | | | | |
| 19. | beneficiary? (These are often called asset- | | | elf-settled tru | ust or similar device | of which you are a | | | | |
| | No☐ Yes. Fill in the details. | | | | | | | | | |
| | Name of trust | | Description and value of the prope | erty transferr | red | Date Transfer was made | | | | |

Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Case 16-13534 Page 40 of 54 Case number (if known) Document

Debtor 1 Christine Lockhart

| Pa | rt 8: List of Certain Financial Accounts, Ins | truments, Safe Depos | it Boxes, and Sto | orage Unit | ts | | | | | | |
|-----|--|--|----------------------------|------------|--|--------|---|--|--|--|--|
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | | | |
| | ■ No | , | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | int or | Date account was closed, sold, moved, or transferred | ı | Last balance before closing or transfer | | | | |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still have it? | | | | |
| 22. | Have you stored property in a storage unit o | r place other than you | r home within 1 | year befo | re you filed for bankrupt | tcy? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still have it? | | | | |
| | Do you hold or control any property that sor | | lude any propert | y you bor | rowed from, are storing | for, | or hold in trust | | | | |
| | for someone. | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe | the property | | Value | | | | |
| Pa | rt 10: Give Details About Environmental Info | rmation | | | | | | | | | |
| For | the purpose of Part 10, the following definition | ons apply: | | | | | | | | | |
| | Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these | e air, land, soil, surfac | e water, ground | | | | | | | | |
| | Site means any location, facility, or property to own, operate, or utilize it, including dispo | | environmental la | aw, wheth | er you now own, operat | te, or | utilize it or used | | | | |
| | Hazardous material means anything an environment, hazardous material, pollutant, contaminant, | | as a hazardous | waste, ha | zardous substance, tox | ic su | ıbstance, | | | | |
| Rep | port all notices, releases, and proceedings tha | it you know about, reg | ardless of when | they occu | urred. | | | | | | |
| 24. | Has any governmental unit notified you that | you may be liable or p | ootentially liable | under or i | n violation of an enviror | nmer | ntal law? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental un Address (Number, | | | onmental law, if you it | | Date of notice | | | | |

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Document Page 41 of 54 ase number (if known) Debtor 1 Christine Lockhart 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Christine Lockhart Signature of Debtor 2 Christine Lockhart Signature of Debtor 1 Date April 20, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Page 42 of 54
Case number (if known) Document

Debtor 1 Christine Lockhart

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 43 of 54

| Fill in this infor | mation to identify you | ur case: | | |
|---|---|--|---|--|
| Debtor 1 | Christine Lockha | art | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the | : NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| <u>Stateme</u> i | orm 108 nt of Intenti | on for Individu | ıals Filing Under | Chapter 7 12/15 |
| If you are an ind | nt of Intenti | hapter 7, you must fill out t | | Chapter 7 12/15 |
| If you are an ind ■ creditors hav | nt of Intenti | napter 7, you must fill out t | his form if: | Chapter 7 12/15 |
| If you are an ind ☐ creditors hav ☐ you have leas You must file thi | nt of Intenti dividual filing under clare claims secured by sed personal property is form with the court ever is earlier, unless | hapter 7, you must fill out t your property, or y and the lease has not exp t within 30 days after you fi | his form if: pired. le your bankruptcy petition or b | Chapter 7 12/15 by the date set for the meeting of creditors, copies to the creditors and lessors you list |
| If you are an ind ☐ creditors hav ☐ you have leas You must file thi whiche on the | nt of Intenti dividual filing under clar ve claims secured by a sed personal property is form with the court ever is earlier, unless form | hapter 7, you must fill out t your property, or y and the lease has not exp t within 30 days after you fi the court extends the time | his form if: pired. le your bankruptcy petition or b for cause. You must also send | by the date set for the meeting of creditors, |
| If you are an ind creditors hav you have leas You must file thi whiche on the If two married po | nt of Intential dividual filing under clave claims secured by seed personal property is form with the court ever is earlier, unlessed form | hapter 7, you must fill out to your property, or y and the lease has not exp t within 30 days after you fi the court extends the time her in a joint case, both are | his form if: pired. le your bankruptcy petition or b of for cause. You must also send equally responsible for supplyi | y the date set for the meeting of creditors, copies to the creditors and lessors you list |

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|---|---|
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of property | □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 44 of 54

| Debtor 1 | Christine L | ockhart | Case number (if kno | wn) |
|--------------------------|---------------------------------|---|---|-------------------------------------|
| name: | | | Retain the property and redeem it. | ☐ Yes |
| Descrip | ption of | | ☐ Retain the property and enter into a Reaffirmation Agreement. | |
| propert | ty | | Retain the property and [explain]: | |
| securir | ng debt: | | | <u> </u> |
| or any un the info | nexpired per ormation belo | w. Do not list real estate leases. | es ted in Schedule G: Executory Contracts and Unexp Unexpired leases are leases that are still in effect; e if the trustee does not assume it. 11 U.S.C. § 365() | the lease period has not yet ended. |
| Describe | your unexpi | red personal property leases | | Will the lease be assumed? |
| Lessor's r | name: | East Lake Management | | □ No |
| | | | | ■ Yes |
| Description Property: | on of leased | Yearly Apartment Lease | | |
| Part 3: | Sign Below | | | |
| | | ry, I declare that I have indicated t to an unexpired lease. | my intention about any property of my estate that | secures a debt and any personal |
| X /s/ 0 | Christine Loc | khart | X | |
| Chri | istine Lockha nature of Debt | | Signature of Debtor 2 | |
| Date | e April 20 | 0, 2016 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-13534 Doc 1 Filed 04/20/16 Entered 04/20/16 17:20:32 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In r | e | Christine Lockha | art | | | Case No. | |
|------|----------|--|--------|--|--|--------------------|-------------------------------------|
| | | | | | Debtor(s) | Chapter | 7 |
| | | DISC | CLO | OSURE OF COMPENSATION | ON OF ATTORN | EY FOR DE | EBTOR(S) |
| 1. | cor | npensation paid to 1 | me v | 29(a) and Fed. Bankr. P. 2016(b), I certivithin one year before the filing of the pare debtor(s) in contemplation of or in co | etition in bankruptcy, or | agreed to be paid | to me, for services rendered or to |
| | | For legal services | s, I h | ave agreed to accept | | \$ | 1,050.00 |
| | | Prior to the filing | of t | his statement I have received | | \$ | 1,050.00 |
| | | Balance Due | | | | \$ | 0.00 |
| 2. | \$_ | 0.00 of the filin | ng fe | e has been paid. | | | |
| 3. | The | e source of the com | pens | ation paid to me was: | | | |
| | | Debtor | | Other (specify): | | | |
| 4. | The | e source of compens | satio | on to be paid to me is: | | | |
| | | Debtor | | Other (specify): | | | |
| 5. | | I have not agreed t | to sh | are the above-disclosed compensation v | vith any other person unl | ess they are mem | bers and associates of my law firm. |
| | | | | the above-disclosed compensation with together with a list of the names of the | | | |
| 6. | In | return for the above | e-dis | closed fee, I have agreed to render legal | service for all aspects of | f the bankruptcy c | ase, including: |
| | b. c. | Preparation and fili | ing o | s financial situation, and rendering advice of any petition, schedules, statement of a ebtor at the meeting of creditors and con- eded] | affairs and plan which ma | ay be required; | |
| 7. | Ву | | tion | otor(s), the above-disclosed fee does not of the debtors in any dischargeabilit seding. | | | of from stay actions or any other |
| | | | | CERT | IFICATION | | |
| this | | ertify that the forego kruptcy proceeding | | is a complete statement of any agreeme | ent or arrangement for pa | yment to me for re | epresentation of the debtor(s) in |
| , | Apri | I 20, 2016 | | | /s/ Thomas G. Stahul | ak | |
| _ | Date | | | | Thomas G. Stahulak | 6288620 | |
| | | | | | Signature of Attorney Stahulak & Associate | s, L.L.C. / GetFi | led |
| | | | | | 53 W. Jackson Blvd., | • | |
| | | | | | Chicago, IL 60604 (312) 662-1480 Fax | : (312) 268-7328 | } |
| | | | | | ecf@stahulakandass | ` ' | |
| | | | | | Name of law firm | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Christine Lockhart | | Case No. | |
|-------|---|--|-----------------------------|----------------|
| | | Debtor(s) | Chapter 7 | |
| | VER | IFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 36 |
| | The above-named Debtor(s) he (our) knowledge. | ereby verifies that the list of credit | tors is true and correct to | the best of my |
| Date: | April 20, 2016 | /s/ Christine Lockhart | | |

Bank of America PO BOX 15710 Wilmington, DE 19886

Bank of America P.O. Box 940812 Simi Valley, CA 93094-0812

Cap One \square Po Box 85520 \square Richmond, VA 23285

Capital One P.O. Box 70886 Charlotte, NC 28272

Capital One PO Box 105474 Atlanta, GA 30348

Capital One PO BOX 85520 Richmond, VA 23285

Capital One PO BOX 30281 Salt Lake City, UT 84130

Chase PO BOX 15153 Wilmington, DE 19886

Chase P.O. Box 24696 Columbus, OH 43224-0696

City of Chicago Department of Revenue PO BOX 88292 Chicago, IL 60680

CMRE Financial Services 3075 E Imperial Hwy Suite 200 Brea, CA 92821 Commonwealth Edison
Bankruptcy Dept
3 Lincoln Center
Oakbrook Terrace, IL 60181

Credit Management, LP Attn: Bankruptcy Po Box 118288 Carrolton, TX 75011

Credit One POBox 60500 City of Industry, CA 91716

Credit One P.O. Box 98873 City of Industry, CA 91716-0500

Credit One Bank PO BOX 98875 Las Vegas, NV 89193

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Diversified Consultant Dci Po Box 551268 Jacksonville, FL 32255

Guaranty Bank PO BOX 240200 Milwaukee, WI 53224

Guaranty Bank PO BOX 245014 Milwaukee, WI 53224

IL Dept of Employment Security 33 S State St 8th Flr Benefit Payment Control Chicago, IL 60603

Illinois Department of Employment Benefit Collections PO BOX 6996 Chicago, IL 60606-6996

Illinois Tollway Attn: Legal Dept 2700 Ogden Ave Downers Grove, IL 60515

Peoples Gas 200 E Randolph St 20th Floor Chicago, IL 60601

Sprint
1 Sprint Parkway
Overland Park, KS 66251

Sprint Corp Attn: Bankruptcy Dept PO Box 7949 Overland Park, KS 66207

T-Mobile T-Mobile Bankruptcy Team P.O. Box 53410 Bellevue, WA 98015

T-Mobile/T-Mobile USA INC %American Infosource LP PO Box 248848 Oklahoma City, OK 73124

TCF 500 Joliet Road Willowbrook, IL 60527

TCF Bank PO Box 18160 Saint Paul, MN 55118

Verizon 500 Technology Dr Ste 30 Saint Charles, MO 63304 Verizon Wireless Po Box 26055 Minneapolis, MN 55426

Verizon Wireless 777 Big Timber Road Elgin, IL 60123

Verizon Wireless 1 Verizon Place Alpharetta, GA 30004

Washington Mutual Chase P.O. Box 15153 Wilmington, DE 19886

Washington Mutual P.O. Box 900123 Louisville, KY 40290